

TOWN OF MARION
TALENT BANK APPLICATION FOR APPOINTMENT or REAPPOINTMENT
TO BOARD, COMMISSION, OR COMMITTEE

Name_____

E-Mail_____

Address_____

Phone_____

Mailing Address _____

The above named individual is requesting consideration for Appointment/Re-Appointment as follows: Board, Commission, or Committee being applied for:

Experience: _____

Previous Town positions held _____

Other Professional or Civic Organizations? _____

Briefly describe why you believe that you would be an asset to the above Board/Commission/Committee:

If appointed, what strengths and unique qualifications might you bring to the Board/Commission/Committee?

How often would you be available to attend meetings?

Weekly _____

Twice per Month _____

Monthly _____

Might any actions taken by this Board/Commission/Committee directly affect you (or your employer)?

Yes _____

No _____

Do you believe that there would be any conflict of interest if you were appointed to this Board/Commission/Committee?

Yes _____

No _____

Applicant Signature

Date